

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

						SERIAL NO	FILING DATE	
						APPLICANT(S)		
						CLAIMS		
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1							51	
2							52	
3							53	
4							54	
5							55	
6							56	
7							57	
8							58	
9							59	
10		3					60	
11		3					61	
12		3					62	
13		3					63	
14		3					64	
15							65	
16							66	
17							67	
18							68	
19							69	
20							70	
21							71	
22							72	
23							73	
24							74	
25							75	
26		7					76	
27		7					77	
28		7					78	
29		7					79	
30		7					80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	4						TOTAL IND.	
TOTAL DEP.	16						TOTAL DEP.	
TOTAL CLAIMS	15						TOTAL CLAIMS	